PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax
(571)-273-2885

				01 <u>FHX</u> (3	11)-213-2003			•	
appropriate All further	correspondence includired below or directed other	ng the i	Patent, advance oi	rders and notification of	maintenance fees v	vill be i	mailed to the current	nould be completed where correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
27581	7590 12/30	/2008							
MEDTRONIC, INC. 710 MEDTRONIC PARKWAY NE MINNEAPOLIS, MN 55432-9924					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
					SUSON	1 1	Jienah	(Depositor's name)	
					Sus an	ん	enaber	(Signature)	
					februa	24	17,2009	(Date)	
APPLICATION NO. FILING DATE				R	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.		
10/693,272				Jordon D. Honeck			P0011374.00 2358		
TITLE OF INVENTION: LEAD FIXATION TOOL									
,		r							
APPLN, TYPE	SMALL ENTITY	SMALL ENTITY IS		PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TO'TAL FEE(S) DUE	DATE DUE	
nonprovisional	NO ·	NO ·		\$300	\$0		\$1810	03/30/2009	
EXAMINER			ART UNIT	CLASS-SUBCLASS					
BOCKELMAN, MARK 3766				607-116000			400	3	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)									
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.									
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
Medtronicitae. Mineapolis, Minnesota									
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🗀 Government									
4a. The following fee(s) a Solution fee			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached.						
Publication Fee (No small entity discount permitted) Advance Order - # of Copies				The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).					
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademork Office.									
NOTE: The Issue Fee and interest as shown by the re	Publication Fee (if requestords of the United Sta	uired) w les Pate	ill not be accepted nt and Trademark	from anyone other than Office.	the applicant; a regi	istered a	attorney or agent; or the	e assignee or other party in	
Typed or printed name	Scott A.	rdell_	Date February 16, 2009 Registration No. 39, 594						
This collection of informa an application. Confident submitting the completed this form and/or suggestic Box 1450, Alexandria, Vi	ality is governed by 35 application form to the ons for reducing this but rginia 22313-1450. DO	FR 1.31 U.S.C. USPTO den, sh	11. The information 122 and 37 CFR D. Time will vary ould be sent to the SEND FEES OR (on is required to obtain or 1.14. This collection is education depending upon the indigential office of the complete of the co	retain a benefit by testimated to take 12 vidual case. Any coer, U.S. Patent and O THIS ADDRESS	the publ minutes omment Traden S. SENI	ic which is to file (and to complete, including s on the amount of time tark Office, U.S. Depa of TO: Commissioner for the complete for th	by the USPTO to process) g gathering, preparing, and ne you require to complete rument of Commerce, P.O. or Patents, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.